

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-------------|--------------|-----------------|
| FEE DETERMINATION | <i>W/TW</i> | | <i>4/1/04</i> |
| O.I.P.E. CLASSIFIER | | | <i>04-13-04</i> |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | <i>YD</i> | <i>68972</i> | <i>01/5700</i> |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 + Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Final | Original | Date |
|-------|-------|----------|--------|
| 1 | ✓ | ✓ | 3/1/04 |
| 2 | ✓ | ✓ | |
| 3 | ✓ | ✓ | |
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| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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Best Available Copy